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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/228,710
	Filing Date	January 11, 1999
	First Named Inventor	Chouldjian et al.
	Art Unit	2644
	Examiner Name	Con P. Tran
Total Number of Pages in This Submission	Attorney Docket Number	017789-000200US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition for 2 Month's Extension of Time <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <input checked="" type="checkbox"/> Self-Addressed return postcard
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
		In response to the Office Action dated January 14, 2004, and Petition for Extension of Time (2 months).

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JUN 10 2004

Technology Center 2600

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual	Townsend and Townsend and Crew LLP Stephen Y. Pang Reg. No. 38,575
Signature	
Date	June 4, 2004

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being mailed by 1st Class Mail, postage pre-paid and addressed to: Mail Stop: Amendment, Commissioner for Patents, Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450 on June ____, 2004 by:		
Typed or printed name	Valerie Peterson	
Signature		Date June 4, 2004

# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ ) 0

Complete if Known

Application Number 09/228,710

Filing Date January 11, 1999

First Named Inventor Chouldjian, Simon

Examiner Name Con Tran

Art Unit 2644

Attorney Docket No. 017789-000200US

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JUN 10 2004

Technology Center 2600

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:Deposit  
Account  
Number

20-1430

Deposit  
Account  
Name

Townsend and Townsend and Crew LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1001	770	Utility filing fee	
		1002	340	Design filing fee	
		1003	530	Plant filing fee	
		1004	770	Reissue filing fee	
		1005	160	Provisional filing fee	

SUBTOTAL (1)

(\$ )

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
28	** = 0		
Independent Claims	3	** = 0	
Multiple Dependent			

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
		1202	18	Claims in excess of 20
		1201	86	Independent claims in excess of 3
		1203	290	Multiple dependent claim, if not paid
		1204	86	** Reissue independent claims over original patent
		1205	18	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$ ) 210.00

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large	Entity	Small	Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
				1051	130	Surcharge - late filing fee or oath	
				1052	50	Surcharge - late provisional filing fee or cover sheet	
				1053	130	Non-English specification	
				1812	2,520	For filing a request for reexamination	
				1804	920*	Requesting publication of SIR prior to Examiner action	
				1805	1,840*	Requesting publication of SIR after Examiner action	
				1251	110	Extension for reply within first month	
				1252	420	Extension for reply within second month	\$210
				1253	950	Extension for reply within third month	
				1254	1,480	Extension for reply within fourth month	
				1255	2,010	Extension for reply within fifth month	
				1401	330	Notice of Appeal	
				1402	330	Filing a brief in support of an appeal	
				1403	290	Request for oral hearing	
				1451	1,510	Petition to institute a public use proceeding	
				1452	110	Petition to revive - unavoidable	
				1453	1,330	Petition to revive - unintentional	
				1501	1,330	Utility issue fee (or reissue)	
				1502	480	Design issue fee	
				1503	640	Plant issue fee	
				1460	130	Petitions to the Commissioner	
				1807	50	Petitions related to provisional applications	
				1806	180	Submission of Information Disclosure Stmt	
				8021	40	Recording each patent assignment per property (times number of properties)	
				1809	770	Filing a submission after final rejection (37 CFR § 1.129(a))	
				1810	770	For each additional invention to be examined (37 CFR § 1.129(b))	
				1801	770	Request for Continued Examination (RCE)	
				1802	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid SUBTOTAL (3)

(\$ )

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)

Stephen Y. Pang

Registration No. (Attorney/Agent)

38,575

Telephone

650-326-2400

Signature

Date

June 4, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.